ATTORNEY'S DOCKET

PHARMA 123

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship ar

the s

stated belowed xt to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DIOXOLANE ANALOGS FOR IMPROVED INTER-CELLULAR DELIVERY

| pecification of which (check only one item below): | | | |
|--|--|--|--|
| | is attached hereto. | | |
| \boxtimes | was filed as United States application | | |
| | Serial No | | |
| | on October 15, 2001 | | |
| | and was amended | | |
| | on (if applicable). | | |
| | was filed as PCT international application | | |
| | Number | | |
| | on | | |

and was amended under PCT Article 19 on (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim priority benefits under Title 35, United States Code, § 119 or 365 (b) of the following United States provisional application(s) and of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

| TRIOR C.S. PROVISIONAL AND FOREIGN/FCT AFFEICATION(S) AND ANY PRIORITY CLAIMS UNDER SS U.S.C. 119: | | | | |
|--|--------------------|--------------------------------------|--------------------------------------|--|
| COUNTRY (if PCT, indicate "PCT") | APPLICATION NUMBER | DATE OF FILING (day, month, year) | PRIORITY CLAIMED UNDER 35 USC 119 | |
| United States | 60/288,424 | May 4, 2001 | ⊠ yes □ no | |
| United States | 60/239,885 | October 13, 2000 | ☐ YES ☐ NO | |
| | | | YES NO | |

POWER OF ATTORNEY: As a named inventor, I hereby appoint I. William Millen (19,544); John L. White (17,746); Anthony J. Zelano (27,969); Alan E.J. Branigan (20,565); John R. Moses (24,983); Harry B. Shubin (32,004); Brion P. Heaney (32,542); Richard J. Traverso (36,595); John A. Sopp (33,103); Richard M. Lebovitz (37,067); John H. Thomas (33,460); James E. Ruland (37,432); Nancy Axelrod (44,014); Jennifer J. Branigan (40,921); Robert E. McCarthy, (46,044); and Jonathan G. Brown (47,451) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Send Correspondence to: Customer No. 23599

Telephone No. 703/243-6333 Direct Telephone Calls to: 703-812-5308



PATENT TRADEMARK OFFICE

Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

PHARMA 123

| 2 | FULL NAME OF INVENTOR | FAMILY NAME | FIRST GIVEN NAME | SECOND GIVEN NAME |
|----------|----------------------------|------------------------------------|----------------------------------|---|
| | | Attardo | Giorgio | |
| 0 | RESIDENCE & CITIZENSHIP | CITY Laval | STATE OR FOREIGN COUNTRY Quebec | COUNTRY OF CITIZENSHIP Canada |
| | POST OFFICE ADDRESS | 2740, rue Prudentiel | CITY Laval | STATE & ZIP CODE/COUNTRY H7K 3M1 Quebec, Canada |
| 2 | FULL NAME OF INVENTOR | FAMILY NAME Zacharie | FIRST GIVEN NAME Boulos | SECOND GIVEN NAME |
| 0 2 | RESIDENCE & CITIZENSHIP | спу Laval | STATE OR FOREIGN COUNTRY Quebec | COUNTRY OF CITIZENSHIP Canada |
| | POST OFFICE ADDRESS | 3202, Honore de Balzac | CITY Laval | STATE & ZIP CODE/COUNTRY H7P 5Y3 Quebec, Canada |
| 2 | FULL NAME OF INVENTOR | FAMILY NAME Rej | FIRST GIVEN NAME Rabindra | SECOND GIVEN NAME |
| 3 | RESIDENCE & CITIZENSHIP | CITY Montreal | STATE OR FOREIGN COUNTRY Quebec | COUNTRY OF CITIZENSHIP Canada |
| 0 | POST OFFICE ADDRESS | STREET 2150, rue Mackay, App. 1105 | Montreal | STATE & ZIP CODE/COUNTRY H3G 2M2 Quebec, Canada |
| 2 | FULL NAME OF INVENTOR | FAMILY NAME Lavallée | FIRST GIVEN NAME Jean-Francois | SECOND GIVEN NAME |
| (0 4 | RESIDENCE & CITIZENSHIP | CITY Mille-Isles | STATE OR FOREIGN COUNTRY Quebec | COUNTRY OF CITIZENSHIP Canada |
| 11 2 | POST OFFICE ADDRESS | STREET 28, Chemin Scraire | Mille-Isles | STATE & ZIP CODE/COUNTRY JOR 1A0 Quebec, Canada |
| | FULL NAME OF INVENTOR | FAMILY NAME Vaillancourt | FIRST GIVEN NAME LOUIS | SECOND GIVEN NAME |
| 0 5 | RESIDENCE & CITIZENSHIP | спу Mascouche | STATE OR FOREIGN COUNTRY Quebec | COUNTRY OF CITIZENSHIP Canada |
| | POST OFFICE ADDRESS | STREET 2869, Desportes | Mascouche | STATE & ZIP CODE/COUNTRY J7K 38J Quebec, Canada |
| 2 | FULL NAME OF INVENTOR | FAMILY NAME Denis | FIRST GIVEN NAME Réal | SECOND GIVEN NAME |
| 0 6 | RESIDENCE & CITIZENSHIP | CITY Montreal | STATE OR FOREIGN COUNTRY Quebec | COUNTRY OF CITIZENSHIP Canada |
| | POST OFFICE ADDRESS | 7250, boul. Gouin est, App. 06 | Montreal | STATE & ZIP CODE/COUNTRY H1E 1A3, Quebec, Canada |
| 2 | FULL NAME OF INVENTOR | FAMILY NAME Lévesque | FIRST GIVEN NAME Sophie | SECOND GIVEN NAME |
| 0 7 | RESIDENCE & CITIZENSHIP | crry Mirabel | STATE OR FOREIGN COUNTRY Quebec | COUNTRY OF CITIZENSHIP Canada |
| | POST OFFICE ADDRESS | STREET 8290, du Labour | crry Mirabel | STATE & ZIP CODE/COUNTRY J7N 1V3, Quebec, Canada |

Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER
PHARMA 123

| 2 | FULL NAME OF INVENTOR | FAMILY NAME | FIRST GIVEN NAME | SECOND GIVEN NAME |
|---------------------------------|----------------------------|-------------|--------------------------|--------------------------|
| 8 | . RESIDENCE & CITIZENSHIP | CITY | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP |
| | POST OFFICE ADDRESS | STREET | CITY | STATE & ZIP CODE/COUNTRY |
| 2 | FULL NAME OF INVENTOR | FAMILY NAME | FIRST GIVEN NAME | SECOND GIVEN NAME |
| 0 9 | RESIDENCE & CITIZENSHIP | CITY | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP |
| | POST OFFICE ADDRESS | STREET | CITY | STATE & ZIP CODE/COUNTRY |
| 12 | FULL NAME OF INVENTOR | FAMILY NAME | FIRST GIVEN NAME | SECOND GIVEN NAME |
| à | RESIDENCE & CITIZENSHIP | СПУ | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP |
| | POST OFFICE ADDRESS | STREET | CITY | STATE & ZIP CODE/COUNTRY |
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| 4 2 5 5 5 5 5 5 5 5 5 5 5 | POST OFFICE ADDRESS | STREET | CITY | STATE & ZIP CODE/COUNTRY |
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| | POST OFFICE ADDRESS | STREET | CITY | STATE & ZIP CODE/COUNTRY |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

| | Nov-B,2001 | 200M0 (M) | 600v200 |
|---|------------------|---------------------------|---------|
| SIGNATURE OF INVENTOR 202 | ATE | SIGNATURE OF INVENTOR 208 | DATE |
| | nte vr-6 2001 | SIGNATURE OF INVENTOR 209 | DATE |
| SIGNATURE OF INVENTOR 204 DATE Francis Lavelle | | SIGNATURE OF INVENTOR 210 | DATE |
| | | SIGNATURE OF INVENTOR 211 | DATE |
| | ATE UW (2001 | SIGNATURE OF INVENTOR 212 | DATE |

COMEINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(Includes Reference to PCT International Applications)

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PRIOR U.S. PROVISIONAL AND FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119-

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| | | | □ ves □ NO | |

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23599

| | FULL NAME OF INVENTOR | FAMILY NAME Attardo | FIRST GIVEN NAME Giorgio | SECOND GIVEN NAME |
|--------|----------------------------|---------------------------------------|---------------------------------|--|
| 0 | , RESIDENCE & | CITY | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP |
| 1 | CITIZENSHIP | Laval | Quebec | Canada |
| ١. | POST OFFICE ADDRESS | 2740, rue Prudentiel | Laval | STATE & ZIP CODE/COUNTRY H7K 3M1 Quebec, Canada |
| - | FULL NAME | FAMILY NAME | FIRST GIVEN NAME | SECOND GIVEN NAME |
| 2 | OF INVENTOR | Zacharie | Boulos | on an arrange |
| 0 2 | RESIDENCE & CITIZENSHIP | спү Laval | STATE OR FOREIGN COUNTRY Quebec | COUNTRY OF CITIZENSHIP Canada |
| | POST OFFICE ADDRESS | 3202, Honore de Balzac | CITY Laval | STATE & ZIP CODE/COUNTRY H7P 5Y3 Quebec, Canada |
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| 3 | POST OFFICE ADDRESS | STREET 2150, rue Mackay, App. 1105 | CITY Montreal | STATE & ZIP CODE/COUNTRY H3G 2M2 Quebec, Canada |
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| 19 | POST OFFICE ADDRESS | STREET 28, Chemin Scraire | CITY Mille-Isles | STATE & ZIP CODE/COUNTRY JOR 1A0 Quebec, Canada |
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| 0 7 | RESIDENCE & CITIZENSHIP | city Mirabel | STATE OR FOREIGN COUNTRY Quebec | COUNTRY OF CITIZENSHIP Canada |
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Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER
PHARMA 123

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| 2 | FULL NAME OF INVENTOR | FAMILY NAME | FIRST GIVEN NAME | SECOND GIVEN NAME |
| 0 8 | RESIDENCE & CITIZENSHIP | СПҮ | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP |
| | POST OFFICE ADDRESS | STREET | CITY | STATE & ZIP CODE/COUNTRY |
| 2 | FULL NAME OF INVENTOR | FAMILY NAME | FIRST GIVEN NAME | SECOND GIVEN NAME |
| 0 9 | RESIDENCE & CITIZENSHIP | СПУ | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP |
| | POST OFFICE ADDRESS | STREET | CITY | STATE & ZIP CODE/COUNTRY |
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| n N | POST OFFICE ADDRESS | STREET | CITY | STATE & ZIP CODE/COUNTRY |
| 2 | FULL NAME OF INVENTOR | FAMILY NAME | FIRST GIVEN NAME | SECOND GIVEN NAME |
| 1 | RESIDENCE & CITIZENSHIP | СПУ | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP |
| 51 | POST OFFICE ADDRESS | STREET | CITY | STATE & ZIP CODE/COUNTRY |
| 2 | PULL NAME OF INVENTOR | FAMILY NAME | FIRST GIVEN NAME | SECOND GIVEN NAME |
| 1 2 | RESIDENCE & CITIZENSHIP | СПУ | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP |
| | POST OFFICE ADDRESS | STREET | СІТУ | STATE & ZIP CODE/COUNTRY |
| | | L | | |

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| SIGNATURE OF INVENTOR 201 | DATE | SIGNATURE OF INVENTOR 207 | DATE |
|---------------------------|-------------|---------------------------|------|
| SIGNATURE OF INVENTOR 202 | NOVEMEN 620 | SIGNATURE OF INVENTOR 208 | DATE |
| SIGNATURE OF INVENTOR 203 | DATE | SIGNATURE OF INVENTOR 209 | DATE |
| SIGNATURE OF INVENTOR 204 | DATE | SIGNATURE OF INVENTOR 210 | DATE |
| SIGNATURE OF INVENTOR 205 | DATE | SIGNATURE OF INVENTOR 211 | DATE |
| SIGNATURE OF INVENTOR 206 | DATE | SIGNATURE OF INVENTOR 212 | DATE |

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